## BUREAU OF INFORMATION

NATIONAL SOCIETY FOR CRIPPLED CHILDREN, ELYRIA, OHIO

# BULLETIN ON CURRENT LITERATURE

OF INTEREST TO CRIPPLED CHILDREN WORKERS

Vol. 2. No. 1

January, 1941

#### INDEX

(Note: Each article or pamphlet mentioned in this bulletin is preceded by a number. In the following index, the numbers used refer to the article which bears this number in this issue of the bulletin.)

Crippling conditions - 2,3,4 Prevention - 2,8,9,16 Cerebral palsy - 3,4 Psychology - 7 Education - 1,5 Hospitalization - 2,14 Legislation - 2,9

State programs - 10,13,17,18 Vocational rehabilitation - 6,12,15 Workshops - 6,15

Any publication or article listed in this bulletin may be borrowed free of charge from the Bureau of Information of the National Society for Crippled Children. Bibliographies listing similar articles, or loan package libraries containing additional literature on any of the subjects discussed in these articles, will be sent to any interested person upon request.

Articles appearing in the bimonthly magazine, THE CRIPPLED CHILD, or in the monthly news letter of this Society, THE CRIPPLED CHILD BULLE-TIN, are not listed in this bulletin.

### BULLETIN ON CURRENT LITERATURE Prepared by Lillian Dowdell, Librarian

Issued monthly to affiliated state and local societies for crippled children, to state agencies engaged in the treatment, education or vocational rehabilitation of cripples, and to public or private institutions or agencies having Institutional Membership in the National Society for Crippled Children.

1) Darlington, Meredith W. and Perkins, S. Orson. The physically handicapped child rings his own school bell. <u>Journal of Exceptional Children</u>, January, 1941. Vol. 7, No. 4, pg. 129.

An article advocating supervised correspondence study for physically handicapped children. Topics discussed are the groups needing home-study, administration of home-study courses, and the outlook for this type of education in this country.

2) Dublin, Louis I. No more tuberculosis by 1960! Survey Graphic, January, 1941, Vol. 30, No. 1, pg. 30.

This article tells of the advances which have been made in the control of tuber-culosis, and gives statistics on the present problem.

"It is my matured conviction that we can, within the next twenty years, bring tuberculosis down to a point where it will be minor item in the records of disability and death in the United States.

"We shall, of course, have to increase measurably our personnel, medical and social service, and train these people more adequately for their respective tasks. We shall, furthermore, be wise to direct our new efforts at more carefully selected objectives than we have in the past. We shall need to concentrate on special groups, such as manual laborers and their families, and particularly on Negroes in urban centers; on workers in mines and factories where there is a specific hazard from silica dust; on young women of childbearing ages; and on older persons with a chronic cough. ....

"It is now clear that the urgency of the situation calls for federal participation; a problem of this magnitude calls for planning on a national scale. Toward this end the National Tuberculosis Association has accepted and launched a plan developed by Homer Folks, dean of American social workers. This plan recommends the construction of 40,000 additional hospital and sanatorium beds for the tuberculous, provides for their maintenance, and for the wholesale X-ray examination of families where known cases of the disease exist.

"This far-reaching and well-considered program covers a period of six years and calls for an expenditure of \$269,000,000 to be absorbed by the federal government, and by the state and local communities in accordance with their resources. .... it is presumed that the federal government would absorb 80 percent of the construction cost of beds and 50 percent of the maintenance and case finding cost.

"...Congressmen Voorhis of California has already introduced a measure known as the Tuberculosis Act of 1940, which provides first, funds for adequate hospital facilities for the control of tuberculosis; and, second, for grants to state and local communities for the training and instruction of hospital personnel and for the development of more effective measures in the prevention and eradication of the disease. Another bill, introduced with the full approval of the President, provides for the construction of hospitals where they are most needed. Some of these institutions would be available for the care of the tuberculous. ..."

3) Duryea, Lyman C., M.D. A Proposed Plan for Providing Adequate Medical Supervision, Treatment, and Education to Children with Cerebral Palsy in New York City. New York City Department of Health, Crippled Children's Division, 303 Ninth Avenue. November, 1940. (Revised) Mimeographed. 18 pages.

A comprehensive, detailed plan for providing adequate facilities for the care and education of New York City's cerebral palsied children. 1845 such children under 21 years of age are known to the Crippled Children's Division at the time of this

report; it is further estimated that there are about 3,500 of school age in the city. These figures, and the recommendations and plans made in this report, do not apply to those children who are mentally deficient.

Statistics and tables on the number, color, age and extent of disability of the cerebral palsied children are given. There is a brief description of the existing facilities throughout the city for these children.

Recommendations are made for the development of many new facilities - clinics, residential units, clinic-day-school units and out-patient departments in hospitals; special cerebral palsy classes in the public school system; and a special treatment and research unit at the New York State Reconstruction Home. Specific recommendations are made on the services - therapeutic, education, recreational and social - which should be made available at each type of treatment or education unit, on the personnel to be employed for each type of unit and on the selection and assignment of children to the proper units.

Special recommendations and plans are made for children who are unable to attend to their personal needs, children who are repulsive in appearance, children afflicted with multiple defects, and children who are home-bound.

It is proposed that a training program be set up for the training of physical therapists and others in muscle re-education of these children.

4) Farrell, Eleanor H. Equipment for the cerebral palsy child. <u>Public Health Nursing</u>, January, 1941. Vol. 33, No. 1, pg. 35. (Single reprints available free from <u>Public Health Nursing</u>.)

This article contains illustrated descriptions of nine articles - chairs, tricycles and velocipedes, walkers, and moving sidewalk - which have been planned for the use of nursery school cerebral palsy children at Spalding School in Chicago.

5) Frampton, Merle E. The teacher of the handicapped. <u>Journal of Exceptional Children</u>, January, 1941, Vol. 7. No. 4, pg. 143.

In this article Dr. Frampton gives some of this personal observations on the future ahead of the professional group of workers and teachers for the handicapped.

6) Institute for the Crippled and Disabled, "School of Another Chance," Summary of Results, January 1, 1939 - June 30, 1940, 400 First Avenue, New York City. 56 pages.

A description of a year's work by an agency which furnishes the following services for its handicapped clients: Vocational guidance, training, and placement; sheltered and home employment; social and medical social service; recreation and physical education; physiotherapy and other needed corrective measures.

During the year from July 1, 1939 to June 30, 1940, the Institute supplied training to 279 men and women, special physical education to 105, sheltered workshop employment to 192, and home employment to 44. \$28,840.17 was paid to disabled persons working in the sheltered workshops and in their homes.

7) Lavos, George, Personality and physical defect. <u>Journal of Exceptional Children</u>, January, 1941. Vol. 7, No. 4, pg. 124.

"... There is no pattern within the personality that is invariably associated with a physical defect. But, by and large, there is an effect. This average or possible effect will be the theme of this study. ...

"In our modern education <u>learning by doing</u> is axiomatic. ... This principle has much to do with the handicapped and their personality development. ... Permitting the child to do things for himself not only increases his knowledge of facts but also his motor abilities such as eye-hand control, speed, deftness. He gets an emotional satisfaction from his accomplishment that is hard to duplicate by other means. This activity has had definite value in his personality development.

"Unfortunately this attitude toward the child's adient responses is not always taken. Instances wherein handicapped children are prone to have their normal activities interfered with by over-solicitous or rejecting parents and friends are numerous and could be cited without end. ... This affects more than his stock of knowledge. Initiative and self-reliance have been stifled. The child, always growing and becoming an adult, soon comes to expect service from his parents, and later, school chums, friends, and fellow workers. ...

"Many parents, teachers, and other people with whom a handicapped child comes in contact believe that a defective person is an economic and social burdern. What this attitude has meant in the past is apparent from any history of the care of handicapped. These attitudes are prevalent today. A child, growing up in the midst of such attitudes, can only absorb this rejection of himself. He begins to think that there is no place for him in the world. His reactions are shame and whithdrawal. ....

"It is essential to the handicapped child and youth that his outgoing activities be encouraged. He develops specific skills, learns many facts, and comes to be self-reliant and secure in his knowledge of his strengths and weaknesses. It is a strong support in a world wherein he will get many rebuffs. .....

"A physical defect can ... interfere with emotional life in two distinct ways. It can lead to a maldevelopment of the emotions. It can force them to seek abnormal outlets. It can also, so to speak, nip in the bud emotional development by preventing its arousal. The abnormal effects of such a situation, if any, have not been studied. ....

"A defect may ... interfere with intelligence in several ways. It may prevent exposure to materials out of which to devise intelligent responses. It may prevent full grasp of the material because of damage to brain tissue. And, finally, it may interfere with the expression of intelligent responses.

"Analyses of the effect of a physical disability, such as deafness or an orthopedic condition, on personality afford us much upon which to base a program of mental hygiene. Fostering of a handicapped child's adient reponses to his environment, development of a proper attitude toward the handicaps, making available vicarious, socially acceptable satisfactions for thwarted emotions, development of emotional life by substitute methods and exposure to enriched environments are all ways in which the handicapped can be benefited. ..."

8) Lowman, Charles Leroy, M.D. The contribution of correctives to child welfare. The Journal of Health and Physical Education, January, 1941. Vol. 12, No. 1, pg. 10.

"Since it has been shown by many authorities that from 50 to 75 percent of all school children have static and postural faults, why should not more attention be paid to health education, and correction be made of such faults in the earlier grades of school? This would raise the physical resistance to harmful influences — infections, etc. — and would probably save much loss of school time during the later years.

"...There is much that is inconsistent and costly in the present methods used. For instance, what is the use of giving an undernourished, lithe-type youngster extra milk and rest if he is at the same time given an activity program which will completely neutralize it? Or why should it be expected that the physical education department can overcome the health handicaps produced in other school departments by having the educational load heavier than the child should bear?... the whole physical education department should be motivated along the line of meeting health needs, and all activities should be modified or adapted so that the majority need is given the chief consideration.

"One illustration will suffice: Most physical directors and school examiners know that at least 75 per cent of all children have some faulty head and shoulder girdle malalignment. ... Activity in the greater number of all sports, athletics, and gymnastics, to say nothing of work requiring the use of the hands, is in front of a person. Also, the gravitational stress ... continues to drag the shoulders down and the head forward all the time the body is erect. ... Since symptoms are almost certain to occur sooner or later in a great majority of persons, would it not be sensible for school directors to see that a higher percentage of anti-gravity exercises be given? ... 'Old man gravity' is pulling us down all our lives. So when holdover values in corrective educational work are talked of, why should it not be realized that the time to stress the development of the antigravity muscles is during the formative school years? ...

"In speaking of corrective physical education I do not wish to give the impression that this is to be limited to certain restricted forms of remedial activity. Rather, I should like to have it understood that all forms of physical educational activities can be of a corrective or preventive value if intelligently adapted and modified to fit the needs of the majority of the pupils. This requires judgment and skill on the part of all directors and coaches. ..."

- 9) Manning, Lucy. Child-labor legislation in 1940. The Child, November-December, 1940. Vol. 5, Nos. 5 and 6, pg. 149.
- 10) Mills, Martin, M.D. Biennial Report of Crippled Children Services, California State Department of Public Health, July 1, 1938 to June 30, 1940. 668 Phelan Building, San Francisco, California. Mimeographed. 21 pages.
- 11) National Foundation for Infantile Paralysis, Inc., The. Annual Report, 1940. 120 Broadway, New York City. 54 pages.

A detailed report of the activities and finances of the Foundation for the period from October 1, 1939 to September 30, 1940. It lists grants to 14 other agencies in the field of virus research, one in the field of nutritional research, 19 in the field of after-effects research, five in the field of education, two in the field of public health or epidemics, and one in the field of treatment (the Georgia Warm Springs Foundation). It also lists 13 special appropriations to the Foundation itself, apart from administrative expenses, for activities in these same special fields - activities such as a brace survey; preparation and distribution of publications; exhibits; a lecture course; a lantern slide library; epidemic emergency equipment and professional services; etc.

12) Pinner, Max, M.D. and Weiss, Moe, M.D. Former patients on the pay roll. The Modern Hospital, January, 1941. Vol. 56, No. 1, pg. 71.

A report of an experimental study of the employability of discharged tuberculosis patients - a study made by the Country Sanatorium of Montefiore Hospital (New York City) which in the past 26 years had employed 83 such individuals, 76 of whom had previously been hospitalized at the Sanatorium.

5.

"Our material is obviously not extensive enough for final and far-reaching conclusions. It seems sufficient to induce others to publish similar studies. Unless further studies show that our favorable experience is caused entirely by fortuitous circumstances, it would appear justifiable to make a strong plea for the employment in hospitals of persons who have recovered from tuberculosis, provided the selection is carefully made.

"If hospitals, and in particular tuberculosis hospitals, do not provide employment for these discharged patients, it can hardly be expected that anybody else will."

13) Plumley, Margaret Lovell, Medical Social Work in Tax-Supported Health and Welfare Services. American Public Welfare Association, 1313 East 60th Street, Chicago, Illinois. 1940. 101 pages. \$1.00.

A study of the qualifications, salary ranges, and activities of medical social workers employed in twenty-one divisions of public service. Seven of these divisions - two in Washington, D. C. and one each in Maine, Massachusetts, Minnesota, Missouri and New York - were agencies providing crippled children's services, and employed 29 of the 129 workers employed by all the agencies studied.

Descriptions of the entire programs of the state crippled children's services in the states listed above are given, as well as accounts of the medical social workers' duties in these programs.

14) Seawell, A. C. Occupational therapy pays its way. The Modern Hospital, January, 1941. Vol. 56, No. 1, pg. 69.

The assistant administrator of the Baylor University Hospital, Dallas, points out the value of an occupational therapy department in a general hospital, and gives a practical account of the costs in rent or hospital space, materials, equipment, and salaries.

15) Sheltered employment in the United States. Wisconsin State Board of Vocational and Adult Education, Rehabilitation Division, 320 State Office Building, Madison. 1940. Mimeographed. 55 pages.

10)

in

11)

120

(21

A study of agencies offering remunerative employment to physically handicapped workers in their homes and in sheltered shops, undertaken by the Wisconsin Rehabilitation Division and the Wisconsin National Youth Administration. In addition to a blanket description on the activities of the Goodwill Industries, there are descriptions of 59 other agencies in the United States and Hawaii.

Although the report is not claimed to be a complete directory, the publishers feel that in their survey all of the large, well established agencies doing this work were uncovered.

A summary of the findings of this survey includes information on the types of agencies reported, financial support of the agencies, articles made and services rendered in sheltered shops and homes, marketing facilities and methods, and wages paid to sheltered workers. Information is also given about other completed and proposed surveys in this field.

16) Silverman, A. Clement, M.D. Analyzing the school health program. Public Health Mursing, January, 1941. Vol. 33, No. 1, pg. 15.

The school health service is here subjected to a careful analysis as to its underlying philosophy and what comprises a necessary, effective and desirable program.

17) Special Services for Connecticut's Crippled Persons, A Directory, 1941. Connecticut Society for Crippled Children, Inc., 65 Wethersfield Avenue, Hartford, Connecticut. 17 pages.

The first part of this directory lists, under the name of each city or town, the local facilities for orthopaedic care and education, such as hospitals, clinics, private agencies, schools and classes, and workshops. The second part is devoted to the activities of state governmental agencies and state-wide private organizations. A third section consists of a glossary of terms used which might not be familiar to the average lay reader.

18) Williamson, Marian. Care of crippled children in Kentucky. Public Health Nursing, January, 1941. Vol. 33, No. 1, pg. 44.

The Director of the Kentucky Crippled Children Commission tells in this article of the work of the Commission, and also of the work of the Kentucky Society for Crippled Children.

In discussing the value of the state-wide volunteer society for crippled children, she points out many ways in which it can assist the governmental agencies in the field. It can help educate the public in regard to the needs of the cripple. It can assist in the actual work of locating the crippled. One of its very important functions is securing enactment of the initial legislation creating the state agency for the crippled, and then standing guard at each session of the legislature to secure adequate appropriations and to prevent political interference in the program. It may be called upon to raise funds to supplement state appropriations. And it may promote the coordination of efforts of all agencies, public or private, to the end that there may be no overlapping or duplication.

# List of Periodicals

(In which articles reviewed here originally appeared)

- The Child, Gov't. Printing Office, Washington, D. C. Monthly. \$1.00 per year; 10¢ per copy.
- Journal of Exceptional Children, 1221 Boston Ave., Flint, Mich. Monthly, October to May, inclusive. \$2.00 per year; 30¢ per copy.
- Journal of Health and Physical Education, 1201 Sixteenth St., Washington, D. C. Monthly, September to June, inclusive. \$2.00 per year, 35¢ per copy.
- The Modern Hospital, 919 N. Michigan Ave., Chicago, Ill. Monthly. \$3.00 per year; 35¢ per copy.
- National Rehabilitation News, 600 South Michigan Ave., Room 708, Chicago, Ill. Bi-monthly. \$1.00 per year; 15¢ per copy.
- Public Health Mursing, 1790 Broadway, New York City. Monthly. \$3.00 per year; 35¢ per copy.
- Survey Graphic, 34 North Crystal Street, East Stroudsburg, Pa. Monthly. \$3.00 per year; 30¢ per copy for January, 1941 issue.